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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

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Foreign Priority claimed ☐ yes ☐ no
35 USC 119 (a-d) conditions met ☐ yes ☐ no ☐ Met after Allowance
Verified and Acknowledged Examiner's Signature Initials

STATE OR

SHEETS

TOTAL

INDEPENDENT

COUNTRY

DRAWING

CLAIMS

CLAIMS

TX

3

20

3

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TITLE

BETA-ADRENERGIC BLOCKADE REVERSAL OF CATABOLISM AFTER SEVERE BURN

FILING FEE RECEIVED 720	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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